



Please type a plus sign (+) inside this box



PTO/SB/81 (02-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/813,253
Filing Date	March 30, 2004
First Named Inventor	Yasushi MIZUSAKI
Title	BEARING DEVICE, AND MANUFACTURING METHOD THEREFOR AND MOTOR PROVIDED WITH BEARING DEVICE
Group Art Unit	3682
Examiner Name	Unknown
Attorney Docket Number	500615.20218

I hereby appoint:

☒ Practitioners at Customer Number **026418**  
**OR**

☐ Practitioner(s) named below:

Name	Registration Number

Place Customer  
Number Bar Code  
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

**OR**

☐ Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Eugene LeDonne, Esq., Reed Smith LLP				
Address	599 Lexington Avenue - 29th Floor				
Address					
City	New York	State	New York	Zip	10022
Country	USA				
Telephone	212-521-5400	Fax	212-521-5450		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Yasushi MIZUSAKI
Signature	<i>Yasushi Mizusaki</i>
Date	12 / 07 / 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/813,253
Filing Date	March 30, 2004
First Named Inventor	Yasushi MIZUSAKI
Title	BEARING DEVICE, AND MANUFACTURING METHOD THEREFOR AND MOTOR PROVIDED WITH BEARING
Group Art Unit	3682
Examiner Name	Unknown
Attorney Docket Number	500615.20218

I hereby appoint:

☒ Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

☐ OR  
Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

☒ Firm or  
Individual Name

Eugene LeDonne, Esq., Reed Smith LLP

Address 599 Lexington Avenue - 29th Floor

Address

City New York State New York Zip 10022

Country USA

Telephone 212-521-5400 Fax 212-521-5450

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name Hisaya NAKAGAWA

Signature *Hisaya Nakagawa*

Date 15 / 07 / 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 2 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.